

ELDER NEEDS ASSESSMENT INTERIM REPORT

Planning for Long-Term Care in the Alaska
Tribal Health System

Kay Branch; Elder/Rural Health Services Planner

June 23, 2004

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The Alaska Native Tribal Health Consortium received funding from the IHS to conduct an assessment of the long-term care needs and health status of Alaska Native elders. The project began in January 2004 and is approaching the process from a systems perspective. Project goals are to determine what services are needed, what is currently available where, and to work as a system to develop services for elders that are culturally appropriate and as close to home as possible. The final report will be useful for local and regional planning, as well as addressing gaps in services from a statewide perspective and developing a system to increase communication statewide to allow elders an seamless transition between Anchorage, their regional hospital and home.

This report is an interim to the final report and provides preliminary data on population estimates, functional limitations, major health problems, and current services available statewide and in each region. The population data is taken from the U.S. 2000 Census. Since historically there has been an under reporting of Alaska Native people in the census records, attempts will be made to combine these data with regional population data from other sources prior to completing the final report. Therefore, readers should be aware that the information contained herein is preliminary and will be further analyzed in the final report due out in December 2004.

Regional tribal health organizations are encouraged to view this report and provide to ANTHC additional information about long-range plans for elder services, current service innovations, up-to-date population numbers, local needs assessments and general comments about the report.

INTRODUCTION

People over the age of 65 are one of the most rapidly growing segments of the population in Alaska. Alaska Native elders are contributing to this growth. IHS figures from 1989 show that there were 3,780 persons over the age of 65, and an additional 2,533 persons between the ages of 55 – 64¹. According to the U.S. 2000 Census there are now 5,948 people over 65, and 5,931 between the ages of 55 – 64. This indicates a 157% increase in population for the 65+, and a 234% increase in the 55 – 64 age group. There are several factors contributing to the increase. According to a National Indian Council on Aging (NICOA) report, the life expectancy of American Indian and Alaska Native elders increased dramatically since the IHS was created in 1955, which reduced the death rates attributable to infectious disease and acute health problems.² From 1940 to 1989 life expectancy at birth grew from 51 to 71.5 years,³ and has continued to increase to 77 years in 1999, which is comparable to the life expectancy of the US White population.⁴

This increase in life expectancy can bring with it increased years of disability and functional limitations due to the chronic diseases experienced by this population. Studies have indicated that American Indians and Alaska Natives report having more disabilities than any other ethnic group.⁵ High rates of functional limitations and increasing numbers of elders exacerbate the need for long term care planning.

¹ Alaska Native Mortality 1979 – 1998. A. Lanier, G. Ehram, J. Sandidge. Office of Alaska Native Health Research. Alaska Native Tribal Health Consortium. August 2002.

² The NICOA Report: Health and Long Term Care for Indian Elders. Robert John and Dave Baldrige. A report by NICOA for the National Indian Policy Center, 1996.

³ Long Term Care in Indian Country Today: A Snapshot. William Benson. American Indian and Alaska Native Roundtable on Long Term Care 2002.

⁴ Census Information on American Indians and Alaska Natives: Implications for Long-Term Care. Mario D. Garrett. American Indian and Alaska Native Roundtable on Long Term Care 2002.

⁵ Healthy People 2010: Reaching American Indian/Alaska Native Elders. Yvonne Jackson. The IHS Primary Care Provider. Volume 25, Number 5. May 2000.

Long term care is care of an elder or individual with a disability who requires on-going assistance with daily activities such as bathing, dressing, eating, shopping and cooking. It is a system of care that integrates medical and social needs to provide services over time. The system includes nursing and assisted living homes, as well as services delivered in the home such as personal care, meal delivery and chore assistance.

IHS AND LONG-TERM CARE

Although it provides health services to more than 1.3 million American Indians and Alaska Natives, the Indian Health Service has not historically funded long-term care services—neither through community services or facility-based care.⁶ Federal funding for IHS has not met the increasing need for services in the acute care arena; therefore, delving into long-term care has not been an option. The IHS has begun to address elder care in the following manner: the creation of the office of the Elder Care Initiative, joint roundtable discussions with the US Administration on Aging, providing grants to Tribes to develop reimbursable services, and funding technical assistance to tribes desiring to develop long term care services.

STATE SERVICES

There is a vast array of home and community based long-term care services available in Alaska. The growth of these services in the past ten years has led to a choice for more Alaska Native elders in where they receive care. Under the current administration, the state is actively encouraging tribal health organizations to provide more long-term care and other services paid for by Medicaid, because the funds would come entirely from the federal government and not require a state match. State offices are providing technical assistance to agencies to build capacity to provide these services. Following is a description of the range of services available.⁷

Nursing Home: Skilled care facilities operated independently or collocated with a hospital. Nursing homes are licensed by the state following national certification and licensing standards. The Certificate of Need process regulates the development of new nursing home beds in Alaska.

Assisted Living Homes: Licensed residential setting that provides for personal and health care needs. Homes must provide three meals per day plus snacks, 24-hour supervision of residents, and assistance with activities of daily living.

Independent Senior Housing: Apartments for seniors and adults with disabilities. May have common space for activities, but usually other services are not provided.

Personal Care Attendants (PCA): A Medicaid program where PCAs assist clients with the activities of daily living. There are two types of personal care programs in Alaska. The agency based program, in which a registered nurse oversees the services and the personal care assistants; and the consumer directed program, where the consumer takes a more direct role in training and supervising their assistant, and an agency acts as a fiscal agent to bill for services and issue payroll.

Home and Community Based Services (HCB): Services provided in a person's home or in a community facility. May include respite care, environmental modifications, adult day care, transportation, specialized medical equipment, chore services, assisted living, private duty nursing, senior center, and congregate or home-delivered meals.

Medicaid Waivers: Instituted in Alaska in 1995, Medicaid Waivers provide people who are eligible for nursing home admission to receive services in their home or another, less restrictive, community setting such as an assisted living home. To be eligible a person must meet the financial eligibility guidelines from the State Division of Public Assistance and meet nursing facility level of care.

⁶ Long Term Care in Indian Country Today: A Snapshot. William Benson. American Indian and Alaska Native Roundtable on Long Term Care 2002.

⁷ Summary of Long Term Care Services for Seniors in Rural Alaska. Rural Long-Term Care Development Program. State of Alaska, Division of Senior and Disabilities Services. January 2004.

Older Americans Act: The federal act regulating funding for nutrition, transportation and supportive services to seniors. Funds from Title III of the OAA pass through the Alaska Commission on Aging to non-profit agencies and governments around the state to provide these services. Title VI is grants to Indian Tribes for similar services. Funding for Title VI flows directly from the federal government to Tribes.

STATEWIDE ALASKA NATIVE ELDER POPULATION & SERVICE UTILIZATION

POPULATION NUMBERS

Table 1 compares the 2000 population of Alaska Native alone or in combination with another ethnicity to the 1990 population. According to this information the population of Alaska Natives older than 55 was 11,879 in 2000. This represents a 137% increase from the 1990 census, with the highest increase seen in the number of Alaska Native males age 70 – 74. The next highest increase is in the “oldest old” group of 85 and over, the group that is most likely to need services.

Table 1. 2000 AK Native Alone or in Combination with another Race

| 2000 AK Native alone or combination | | | | 1990 AK Native alone or combination | | | % Increase |
|-------------------------------------|---------------|--------------|--------------|-------------------------------------|-------------|-------------|-------------|
| AGE | Total | Male | Female | Total | Male | Female | |
| 55 – 59 | 3,411 | 1,676 | 1,735 | 2589 | 1289 | 1300 | 132% |
| 60 – 64 | 2,520 | 1,270 | 1,250 | 1949 | 937 | 1012 | 129% |
| 65 – 69 | 2,191 | 1,010 | 1,181 | 1590 | 779 | 811 | 138% |
| 70 – 74 | 1,644 | 771 | 873 | 977 | 432 | 545 | 168% |
| 75 – 79 | 1,065 | 476 | 589 | 825 | 355 | 470 | 129% |
| 80 – 84 | 566 | 215 | 351 | 442 | 181 | 261 | 128% |
| 85 + | 482 | 156 | 326 | 303 | 140 | 163 | 159% |
| Total | 11,879 | 5,574 | 6,305 | 8675 | 4113 | 4562 | 137% |

Source : U.S. Census Bureau 1990 & 2000 Population Census

Table 2 presents estimated population increases to year 2018 for the total Alaska Native population over 65 years old. Data are extrapolated from the projections for the total Alaska 65+ population by region accounting for regional differences in population increases. The Alaska Department of Labor projects a more rapid increase for the Anchorage and Mat-Su areas. More research is needed to determine if the same rate of increase can be predicted for the Alaska Native elder population in these areas.

Table 2. Projected Increase in Alaska Native 65+ Population

| | Current | 2008 | 2013 | 2018 |
|------------------|----------------|-------------|-------------|-------------|
| Alaska | 5,948 | 7,394 | 9,524 | 12,424 |
| Arctic Slope | 280 | 327 | 408 | 506 |
| Maniilaq | 330 | 386 | 482 | 597 |
| NSHC | 459 | 537 | 671 | 832 |
| YKHC | 1,073 | 1,287 | 1,583 | 2,073 |
| BBAHC | 337 | 404 | 496 | 649 |
| A/PIA & EAT | 121 | 145 | 178 | 233 |
| KANA | 160 | 205 | 274 | 370 |
| SC Anchorage | 974 | 1,275 | 1,695 | 2,220 |
| SC Mat-Su | 120 | 154 | 204 | 267 |
| SC Kenai | 208 | 266 | 356 | 480 |
| Valdez & Cordova | 120 | 153 | 205 | 276 |
| Southeast | 1,077 | 1,367 | 1,818 | 2,363 |
| TCC | 689 | 888 | 1,154 | 1,558 |

Source: Projected Population 65+ Years of Age July 1, 1998-2018. Alaska Department of Labor, Research and Analysis Section, Demographics Unit.

NURSING HOME UTILIZATION

There are currently 749 nursing home beds in Alaska. Through conversations with nursing home administrators it is estimated that at any given time approximately 150 – 155 are Alaska Native residents. The homes with the highest proportion of Alaska Native elders are Denali Center (30%), Providence Extended Care (25%), and Quiana Care (95-100%). The total number of Alaska Native residents increases when looking at the data over a one-year period. Table 3 shows the number of Alaska Native nursing home residents whose payments were through Medicaid during four fiscal years, defining the total residents and the average number of days per year that each resident is in a nursing home. Homes with the highest number of days per year, indicating more long-term residents, are Sitka Community Hospital, Providence Kodiak Island Medical Center, and Heritage Place in Soldotna.

Table 3. Alaska Native Medicaid Nursing Home Residents

| | FFY 2000 | FFY 2001 | FFY 2002 | FFY2003 |
|-----------------------|----------|----------|----------|---------|
| Total Residents | 296 | 275 | 270 | 277 |
| Average days per year | 285 | 257 | 251 | 241 |

Source: Division of Health Care Services, Department of Health and Social Services, State of Alaska

According to two demand estimation methods, the current demand for nursing home beds in Table 4 is comparable to the actual beds occupied for the last four fiscal years. Future demand for nursing home beds is shown in Table 5. Keep in mind that these figures are preliminary; a more detailed projection of nursing bed need will be included in the final report.

Table 4. Current demand for Nursing Home Beds

| Age | Total | at risk | Demand | 4.9% |
|--------------|---------------|----------------|---------------|-------------|
| 55-64 | 5,856 | 0.001 | 6 | |
| 65-74 | 3,805 | 0.011 | 42 | 186 |
| 75-84 | 1,615 | 0.046 | 74 | 79 |
| 85+ | 482 | 0.192 | 93 | 24 |
| Total | 11,758 | | 215 | 289 |

Column 4 based on National Center for Health Statistics demand model, Health and Aging Chartbook. Hyattsville, MD. 1999. Column 5 represents 4.9% of the 65+ population referenced in Table 5.

Table 5. Projected Nursing Home Need 2008 – 2018

| | 2008 | 4.90% | 2013 | 4.90% | 2018 | 4.90% |
|--|-------------|--------------|-------------|--------------|-------------|--------------|
|--|-------------|--------------|-------------|--------------|-------------|--------------|

| | | | | | | |
|------------------|--------------|-----|--------------|-----|---------------|-----|
| Alaska | 7,394 | 362 | 9,524 | 467 | 12,424 | 609 |
| Arctic Slope | 327 | 16 | 408 | 20 | 506 | 25 |
| Maniilaq | 386 | 19 | 482 | 24 | 597 | 29 |
| NSHC | 537 | 26 | 671 | 33 | 832 | 41 |
| YKHC | 1,287 | 63 | 1,583 | 78 | 2,073 | 102 |
| BBAHC | 404 | 20 | 496 | 24 | 649 | 32 |
| A/PIA & EAT | 145 | 7 | 178 | 9 | 233 | 11 |
| KANA | 205 | 10 | 274 | 13 | 370 | 18 |
| SC Anchorage | 1,275 | 62 | 1,695 | 83 | 2,220 | 109 |
| SC Mat-Su | 154 | 8 | 204 | 10 | 267 | 13 |
| SC Kenai | 266 | 13 | 356 | 17 | 480 | 24 |
| Valdez & Cordova | 153 | 7 | 205 | 10 | 276 | 14 |
| Southeast | 1,367 | 67 | 1,818 | 89 | 2,363 | 116 |
| TCC | 888 | 44 | 1,154 | 57 | 1,558 | 76 |

Bed need projections based an estimate of 4.9% of the 65+ population cited in an AHRQ Research Report.⁸

MEDICAID SERVICES

Preliminary findings indicate that 80 - 85% of the Alaska Native elders over the age of 65 may be eligible for Medicaid, the primary payer of long-term care services in Alaska. As with the nursing home data above, home and community based services paid by Medicaid can be easily tracked. Table 6 describes the number of Alaska Natives receiving the following Medicaid services: personal care attendants, Older Alaskan Waiver, and Adults with Physical Disabilities Waiver. APD waivers do include the population ranging in age from 18 – 64, so there may be non-elders depicted. Nevertheless, they are individuals that would benefit from a tribal systems approach to long-term care services. The large number of clients in some regions is indicative of the capacity for service delivery. To protect the privacy of individuals, only the areas with larger client numbers are enumerated independently. Due to the small number of clients on the APD Waiver in YKHC and BBAHC those numbers are removed from the region and included in the “all other” category.

Table 6. Medicaid Services FFY 2003

| Area | PCA | OA Waiver | APD Waiver |
|---------------------|------------|------------------|-------------------|
| Alaska Total | 635 | 327 | 240 |
| YKHC | 152 | 41 | |
| BBAHC | 49 | 17 | |
| SC Anchorage | 152 | 120 | 104 |
| SC Mat-Su | 27 | 12 | 15 |
| SC Kenai | 35 | 15 | 18 |
| SEARHC | 110 | 64 | 53 |
| TCC | 79 | 34 | 23 |
| All Other | 31 | 24 | 27 |

Source: Division of Health Care Services, Department of Health and Social Services, State of Alaska

⁸ “The Characteristics of Long-Term Care Users” AHRQ Research Report, AHRQ Publication No. 00-0049, January 2001. Agency for Health Care Research and Quality, Rockville, MD.

ASSISTED LIVING

Medicaid also is a primary payer for assisted living in Alaska. From October 2002 to the present there have been 229 Alaska Native people in assisted living homes whose services are paid by Medicaid. The majority (151) are in 66 different Anchorage assisted living homes. There are an additional 84 Alaska Natives in assisted living homes receiving payment assistance from the General Relief Program through Adult Protective Services. The preliminary data on these residents does not include location of service. There are three rural assisted living homes in Kotzebue, Barrow and Tanana that serve mostly Native clientele and receive either other state or local funding. There are an additional 25 residents at these homes. The Pioneers Homes, which are also assisted living, house very few Alaska Native residents. Out of 608 available beds there were only 44 Native residents in April 2004. Conversations with the Director of Longevity Programs indicate that they typically don't have more than 10% Native residents. Further analysis of these data will be included in the final report.

HEALTH STATUS AND FUNCTIONAL LIMITATIONS

Table 7 presents the leading causes of death for age groups of elders. Note the change in leading causes with increased age. The major cause of death in the 55-64 age group is cancer followed by heart disease and injury. In the 75+ age group the leading cause shifts to heart disease and injury drops below COPD, cerebrovascular diseases and pneumonia. The chronic nature of many of these diseases can produce many years of disability for elders. Of note also is the rate of suicide for this age group. Although Alaska's suicide rate is alarmingly high in younger age groups, the suicide rates in elder Alaska Natives and American Indians are considerably lower than the U.S. general population.⁹

Table 7. Leading Causes of Death by Age 1989 - 1998

| Cause | 55-64 | 65-74 | 75+ | Total |
|-------------------------------|--------------|--------------|-------------|--------------|
| Cancer | 256 | 296 | 293 | 845 |
| Heart Disease | 151 | 234 | 423 | 808 |
| Unintentional Injuries | 67 | 35 | 39 | 141 |
| Chronic Obstructive Pulmonary | 43 | 67 | 111 | 221 |
| Cerebrovascular Diseases | 36 | 39 | 147 | 222 |
| Chronic Liver Disease | 34 | 13 | 3 | 50 |
| Pneumonia & Influenza | 17 | 22 | 89 | 128 |
| Diabetes Mellitus | 15 | 23 | 35 | 73 |
| Suicide | 13 | 5 | 0 | 18 |
| Homicide & Legal Intervention | 7 | 4 | 1 | 12 |
| All Other Causes | 139 | 180 | 363 | 682 |
| Total | 778 | 918 | 1504 | 3200 |

Source: Alaska Native Mortality 1979-1998.

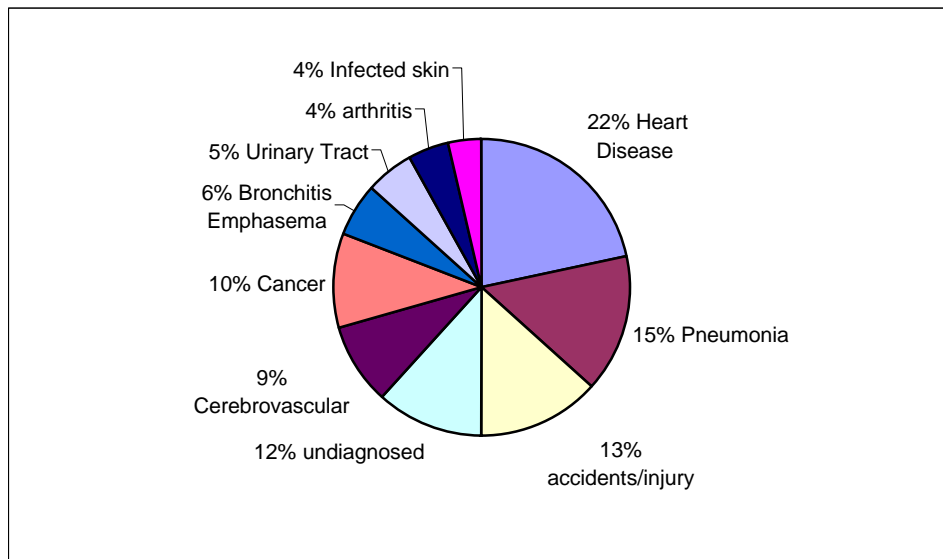
Figures 1 and 2 present the leading causes of hospitalization and outpatient visits for the elder population. These correlate to the major causes of death and indicate that there is a high incidence of diseases of the heart, circulatory and respiratory systems. Reports indicate that Alaska Native people have a higher prevalence of risk factors for heart disease, such as smoking, high blood pressure and excess weight. Additionally the COPD death rate in Alaska Natives is almost double the rate for whites.¹⁰ Furthermore, COPD usually results in years of disability in the older population, and increased levels of disability can also be found in individuals experiencing a heart attack or stroke.¹¹

⁹ Indian Health Focus: *Elders*. U.S. Department of Health and Human Services. Indian Health Service. Office of Public Health. Office of Program Support. Program Statistics Team. 1998-1999.

¹⁰ Healthy Alaskans 2010. Volume 1: Targets for Improved Health. State of Alaska, Department of Health and Social Services, Division of Public Health. 2001.

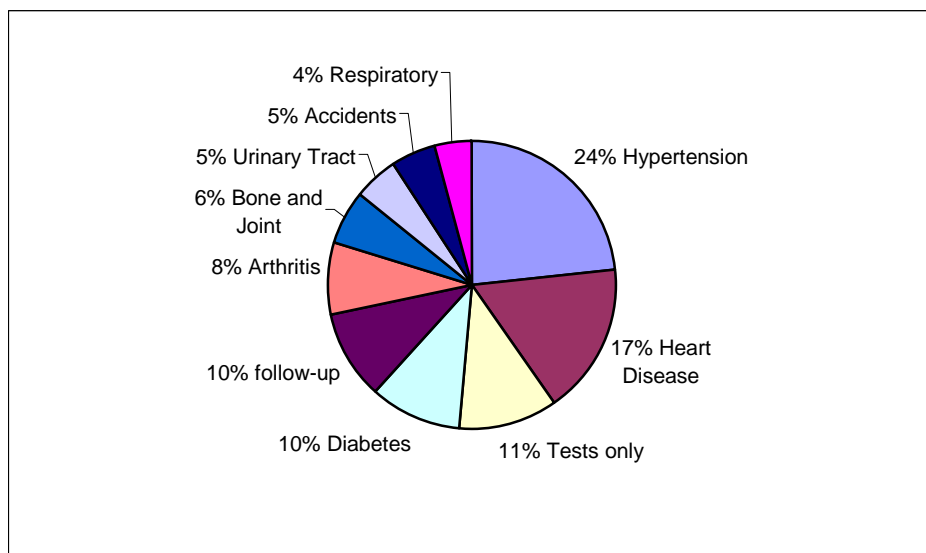
¹¹ Ibid

Figure 1. Alaska Area Leading Causes of Hospitalization for Ages 65+ FFY92 – FY97



Source: IHS Inpatient/Outpatient Reporting System in Albuquerque, Direct Inpatient Report 2C; RPMS.

Figure 2. Alaska Area Leading Causes of Outpatient Visits for Ages 65+, FY92 – FY97



Source: IHS Inpatient/Outpatient Reporting System in Albuquerque, APC Report 1C

Increased levels of disability affect the functional status of an individual and their ability to continue to perform the tasks related to daily living (ADL), such as bathing, grooming, eating and moving around. The measure of functional status is the most frequently used predictor in determining the need for long term care services. However, estimating functional status is difficult and there are several different methods that provide contrasting estimates. Tables 8 and 9 describe three methods of estimating functional limitations currently in use. From these tables a range of the number of individuals with functional limitations can be extrapolated. Table 8 highlights a model of expected population at risk of functional limitations by age group.

The estimates in Table 9 are based on survey results indicating that 18% of the 55-64 age group and 23.4% of the 65+ age groups have moderate limitations (one ADL deficiency); 6.6% of those 55-64 and 7.4% of the 65+ have moderately severe limitations (two ADL deficiencies); and 10.7% of those 55-64 and 14.7% of those 65+ have severe limitations (three or more ADL deficiencies). The last column represents an earlier sample which indicated that 9.6% of the respondents age 55 and older had limitations in four ADL.

Further analysis is needed but it can be suggested that the range of Alaska Native elders who experience difficulty in competing daily tasks is between 995 and 1509, higher if you include those with moderately severe impairment levels.

Table 8. Estimates of Functional Limitations (Spector)

| Alaska Total | | | |
|--------------|---------------|-----------|------------|
| Age | Total | % at risk | Demand |
| 55-64 | 5,856 | 2% | 117 |
| 65-74 | 3,805 | 8% | 304 |
| 75-84 | 1,615 | 20% | 323 |
| 85+ | 482 | 52% | 251 |
| Total | 11,758 | | 995 |

Source: Spector, WD, et.al. (1998)¹²

Table 9. Estimates of Functional Limitations (NRCNAA)

| Statewide Alaska Native Population | | | | | |
|------------------------------------|--------------|-------------|------------|-------------|-------------|
| Age | Total | M | M/S | S | 4 ADL |
| 55 – 64 | 5931 | 1068 | 391 | 635 | 569 |
| 65+ | 5948 | 1392 | 440 | 874 | 571 |
| Total | 11879 | 2459 | 832 | 1509 | 1140 |

Source: National Resource Center on Native American Aging Needs Assessment Project¹³

FACILITY AND SERVICE NEEDS

The majority of long-term care is provided by families, this is especially true in our Native communities. Traditionally, families and extended families cared for elders if they were no longer able to do things for themselves. Alaska Native families have many stories relating to caring for elders. For example, families carrying their elders on makeshift stretchers to fish camp for the summer, and then back to their winter home. There are families pulling together to care for very ill and frail elders at home with little outside help, and times when this is not possible and families are forced to make the difficult decision to place their loved one in a distant nursing or assisted living home. Usually this happens as a result of the changing economy in rural villages, from subsistence to cash-based, and the need for family members to find work outside the home. There is also an increasing out migration of younger Alaska Native people to urban centers, which leaves fewer family members to assist in providing care.

Rural Alaska presents some particular challenges in delivering services that may be typically available to seniors in more urban areas of the state. Distances between villages and the high cost of food and supplies contribute to the challenges. Most elders, like those elsewhere, desire to remain in their own homes, and if they cannot be in their own home, at least as close to home as possible. The alternative is usually a nursing home or assisted living in Anchorage or Fairbanks, far from their family and the place they have lived most of their lives, and home to a culture with significantly different values. Providing the range of long term care services desired by elders and their families is the true challenge of the Alaska Tribal Health System.

Preliminary potential service and facility needs are described for each region. These needs are projected from the available data, information from regional health organizations about their future plans for elder services, and the author's knowledge of the long-term care system in Alaska. The needs are not exhaustive. Additional information obtained during the next six months will provide a more detailed understanding of the service and facility needs for Alaska Native elders.

¹² Spector, WD, et.al., "The Characteristics of Long Term Care Users," Institute of Medicine, Committee on Improving Quality of Long Term Care. Washington, DC. 1998.

¹³ NRCNAA project, "Identifying Our Needs: A Survey of Elders," a nationwide needs assessment project containing 8,560 respondents in 83 tribes.

In addition to the regional service and facility needs, there are three identifiable needs from the statewide perspective:

- Statewide coordination of long-term care services to allow elders to transition easily from one care setting to another.
- Continued support for the Rural Tribal PCA Work Group and their goals of ensuring quality personal care services throughout the Tribal Health System.
- Transitional housing in Anchorage for people who no longer need hospitalization, but are not yet able to return home.
- The high rate of cancer in this population and the desire of elders to be in their own homes speaks to the need for the coordination of a statewide palliative care program that will allow people with a terminal diagnosis to return to their community.

REGIONAL SUMMARIES

Regions are summarized according to tribal health service units and the U.S. Census Areas. Further analysis of regional data will be provided in the final report. The facility and service needs depicted are either from current plans of the regional organization or assumptions based on the knowledge of the author, who has extensive experience planning for long term care in rural Alaska. Regional tribal health organizations are encouraged to review this information and provided feedback to the Elder Needs Assessment Project. The final report will offer more detailed analysis that can be utilized during the process of planning for long-term care services regionally. Regional tribal health organizations would be wise to conduct independent marketing studies for facilities and develop business plans prior to construction.

Each section includes the current population, estimated number of individuals requiring nursing home care and having functional limitations, individuals receiving Medicaid waiver or personal care services during the last federal fiscal year,¹⁴ and residents in regional nursing and assisted living homes, if applicable. Also included is a description of current services adapted from the "Summary of Long Term Care Services in Rural Alaska," State of Alaska, Division of Senior and Disabilities Services, January 2004, with additions made from conversations with granting agencies and local providers.

¹⁴ Source: Division of Health Care Services, Department of Health and Social Services, State of Alaska.

NORTH SLOPE BOROUGH CENSUS AREA - ARCTIC SLOPE NATIVE ASSOCIATION

The Elder Population in the North Slope Borough Census Area:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 264 | Total 55+ | 544 |
| 65 – 74 | 179 | Total 65+ | 280 |
| 75 – 84 | 84 | M 55+ | 261 |
| 85+ | 17 | F 55+ | 283 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 9 | 40 – 107 | 2 | 7 |

CURRENT SERVICES

Nursing Home: No nursing home beds, no swing beds.

Assisted Living: The North Slope Borough (NSB) owns and operates a licensed home with eleven assisted living beds. The home is subsidized by NSB. Residents pay approximately \$800/month for their services. Due to flooding and now asbestos in the permanent facility, seven residents are housed in a temporary location and additional residents cannot be admitted until a more permanent location is found.

Independent Senior Housing: 37 units of independent senior housing are operated by the NSB. NSB Housing and Property Management Department received funding from the HUD 202 program for five units of senior housing in five villages (Point Home, Anaktuvik Pass, Kaktovik, Wainwright and Nuiqsut). They are seeking additional funding for construction and looking at ways to integrate other services.

PCA: The NSB funded and operated a homemaker program in all villages up until a few years ago. Through this program they provided an array of services to elders that included assistance with the activities of daily living. The NSB and Arctic Slope Native Association are currently exploring ways to provide PCA services in the region.

HCB: The NSB operates a senior center and senior transportation services in Barrow, providing congregate and home delivered meals to Barrow seniors with OAA funding. There are limited services available in the surrounding villages.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Continued development of home and community based services, including personal care and Medicaid waiver services
- Permanent assisted living home for 8 - 12 residents
- Swing beds as part of the new hospital design

FUTURE DEMAND

Based on the projected increase in elder population, the North Slope could have an over 65 population of 506 by 2018. According to national percentage estimates for expected nursing home residents, 25 people could need nursing home services in comparison to the current need of 9. We can expect a corresponding increase in the number of elders experiencing functional limitations.

NORTHWEST ARCTIC BOROUGH – MANIILAQ ASSOCIATION

The Elder Population in the Northwest Arctic Borough Census Area:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 257 | Total 55+ | 587 |
| 65 – 74 | 225 | Total 65+ | 330 |
| 75 – 84 | 79 | M 55+ | 284 |
| 85+ | 26 | F 55+ | 303 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 11 | 52 – 117 | 8 | 11 |

CURRENT SERVICES

Nursing Home: Currently no nursing home beds, no swing beds. Maniilaq has completed a feasibility study to add a nursing home wing onto the hospital in the future.

Assisted Living: Maniilaq owns and operates a licensed home with twenty assisted living beds. This home is subsidized by a yearly state Senior Residential Services (SRS) grant of \$850,000, and various other grants. Residents pay approximately \$600/month for their services. The state has indicated that the SRS funds will not be available in the future. Maniilaq is exploring other housing and assisted living options for elders.

Independent Senior Housing: There is one 15-unit independent senior apartment complex in Kotzebue, none in the regional villages.

PCA: Maniilaq used to receive funding for personal care services under their Budget Reserve Unit (BRU) funding from the state. Service provision has fluctuated over the years in both personal care and waiver services. In FY02 the personal care component was pulled from their grant. They continued to provide some in-home services with other Maniilaq funds in communities where workers were available. In the past six months Maniilaq completely revitalized their personal care program and are working to care for elders in their own homes.

HCB: Kotzebue has a senior center with congregate and home delivered meals transportation services, operated by Maniilaq with OAA funding. Maniilaq also operates a traditional foods program in the region, where hunters are provided with supplies in order to obtain and distribute subsistence foods to the elders.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Continued development of home and community based services, including personal care and Medicaid waiver services
- Permanent assisted living home for 8 - 12 residents
- Add 3 – 4 swing beds to hospital services

FUTURE DEMAND

Based on the projected increase in elder population, the Maniilaq region could have an over 65 population of 597 by 2018. According to national percentage estimates for expected nursing home residents, 29 people could need nursing home services, compared to the current demand of 11. We can expect a corresponding increase in the number of elders experiencing functional limitations.

NOME CENSUS AREA – NORTON SOUND HEALTH CORPORATION

The Elder Population in the Nome Census Area:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 410 | Total 55+ | 869 |
| 65 – 74 | 265 | Total 65+ | 459 |

| | | | |
|---------|------------|-------|------------|
| 75 – 84 | 135 | M 55+ | 437 |
| 85+ | 59 | F 55+ | 432 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 21 | 87 - 172 | 9 | 15 |

CURRENT SERVICES

Nursing Home: Fifteen nursing home beds at Qujana Care Center, operated by the Norton Sound Health Corporation, which are consistently occupied at 100%. No swing beds.

Assisted Living: There is currently no assisted living home in the Norton Sound Region. Several attempts by different agencies over the last five years to develop assisted living have not moved forward.

Independent Senior Housing: The Bering Straits Regional Housing Authority operates 19 units of independent senior housing in Nome. The 17-unit Munaqsri Senior Apartments are operated by Nome Community Center, as is a five unit elderly apartment building in Stebbins.

PCA: NSHC has operated a PCA program in Nome and the regional villages for several years. Like Maniilaq, their PCA and waiver services have fluctuated, and they also lost the PCA portion of their BRU in June 2002. NSHC is working to revitalize the program.

HCB: NSHC is also offering care coordination services for Medicaid waivers and building their client base. With OAA funding Nome Community Services operates a senior center providing congregate and home delivered meals, transportation and adult day services to Nome elders. The Native Villages of Gambell and Savoonga also provide congregate meals.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Continued development of home and community based services, including personal care and Medicaid waiver services
- Assisted living home for 8 - 12 residents

FUTURE DEMAND

Based on the projected increase in elder population, the Norton Sound region could have an over 65 population of 832 by 2018. According to national percentage estimates for expected nursing home residents, 41 people could need nursing home services, doubling the current demand of 11. We can expect a corresponding increase in the number of elders experiencing functional limitations.

BETHEL AND WADE HAMPTON CENSUS AREAS – YUKON KUSKOKWIM HEALTH CORPORATION

The Elder Population in the Bethel and Wade Hampton Census Areas:

| | | | |
|---------|------------|-----------|-------------|
| 55 – 64 | 989 | Total 55+ | 2062 |
| 65 – 74 | 663 | Total 65+ | 1073 |
| 75 – 84 | 329 | M 55+ | 1029 |
| 85+ | 81 | F 55+ | 1033 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 39 | 181 - 409 | 155 | 0 |

CURRENT SERVICES

Nursing Home: No nursing home beds, three swing beds at the Yukon-Kuskokwim Delta Regional Hospital.

Assisted Living: There is no assisted living home in the Y-K Delta. YKHC is currently seeking funding for an 18-unit home in Bethel. Long-range plans call for development of smaller homes in the subregional centers of Aniak, St. Mary's, Emmonak, and eventually Toksook Bay.

Independent Senior Housing: The Ayalpik Apartments (23 units) and the Lulu Heron Center (16 units) are operated by the AVCP Housing Authority.

PCA: YKHC has a well-developed personal care program offering both consumer directed and agency based services in all villages.

HCB: YKHC provides care coordination and other Medicaid Waiver services throughout the region. The City of Bethel operates a senior center with daily congregate and home delivered meals, senior transportation, and an adult day center, with OAA funding. The Association of Village Council Presidents has OAA funding to provide meals and supportive services in regional villages. The Kuskokwim Native Association receives OAA funding for services in the Kuskokwim subregion.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Assisted living home for 18 residents in Bethel
- Smaller 4 – 7 unit assisted living homes or supportive housing in subregional centers
- Nursing home addition to the hospital for another 10 – 20 residents
- Continued growth of other HCB services

FUTURE DEMAND

Based on the projected increase in elder population, the Yukon-Kuskokwim region could have an over 65 population of 2,073 by 2018. According to national percentage estimates for expected nursing home residents, 102 people could need nursing home services, two and a half times the current demand of 39. We can expect a corresponding increase in the number of elders experiencing functional limitations.

DILLINGHAM CENSUS AREA, LAKE AND PENINSULA AND BRISTOL BAY BOROUGH – BRISTOL BAY AREA HEALTH CORPORATION

The Elder Population in the Dillingham, Lake & Pen, Bristol Bay Census Areas:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 351 | Total 55+ | 688 |
| 65 – 74 | 220 | Total 65+ | 337 |
| 75 – 84 | 93 | M 55+ | 353 |
| 85+ | 24 | F 55+ | 335 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 12 | 56 - 135 | 50 | 12 |

CURRENT SERVICES

Nursing Home: No nursing home beds, four swing beds at Kanakanak Hospital in Dillingham.

Assisted Living: Marrulut Eniit Assisted Living (MEAL) in Dillingham is licensed for 15 residents and serves the Bristol Bay Region. It also has residents from the YK Region. It is owned and operated by a non-profit association, with board members representing all regional entities. Payroll and billing is run through the Bristol Bay Housing Authority. When occupancy is low, the Housing Authority must subsidize operations. Most residents are on a Medicaid waiver and are therefore nursing home level of care.

Independent Senior Housing: There are 15 apartments in Dillingham and 11 in Naknek. Construction is currently underway for 5 units in New Stuyahok.

PCA: The Bristol Bay Native Association (BBNA) provided agency based personal care services from 1997 – 2003. They have recently discontinued this service and have transferred all clients to three non-tribal consumer directed agencies providing services in the area.

Home Health: BBAHC provides home health and palliative care to individuals throughout the region through their Helping Hands Program.

HCB: BBNA provides care coordination and other Medicaid waiver services to all regional villages. With OAA funds, BBNA provides meals and supportive services to village elders. These services are available in Dillingham through the City's senior center. The village of Aleknagik and the Bristol Bay Elders Council receive funding for transportation in Aleknagik, Naknek and King Salmon

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Tribally based personal care services
- Utilization of swing beds when needed

FUTURE DEMAND

Based on the projected increase in elder population, the Bristol Bay region could have an over 65 population of 649 by 2018. According to national percentage estimates for expected nursing home residents, 32 people could need nursing home services, an increase in the current demand of 12. We can expect a corresponding increase in the number of elders experiencing functional limitations.

ALEUTIANS WEST CENSUS AREA & ALEUTIANS EAST BOROUGH – ALEUTIAN/PRIIBILOF ISLANDS ASSOCIATION & EASTERN ALEUTIAN TRIBES, INC.

The Elder Population in the Aleutians West Census Area and Aleutians East Borough:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 145 | Total 55+ | 266 |
|---------|------------|-----------|------------|

| | | | |
|---------|-----------|-----------|------------|
| 65 – 74 | 84 | Total 65+ | 121 |
| 75 – 84 | 30 | M 55+ | 137 |
| 85+ | 7 | F 55+ | 129 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 4 | 19 - 52 | 3 | 0 |

CURRENT SERVICES

Nursing Home: No nursing home beds, no swing beds.

Assisted Living: There are no assisted living homes in the region.

Independent Senior Housing: There are 14 independent senior apartments in St. Paul and 15 units in Unalaska.

PCA: Eastern Aleutian Tribes and A/PIA are working to develop personal care and Medicaid waiver services.

HCB: The senior center in Unalaska receives OAA funding for meals and transportation. With OAA funding, A/PIA provides monthly food boxes to elders in the region. A/PIA recently received a grant from IHS to assist with the development of reimbursable long-term care services. They are collaborating with EAT on an elder needs assessment and program development.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

This region is the most underserved region in the state in regards to long-term care services. This is primarily due to the remoteness and also because there are fewer elders in this region who are eligible for Medicaid due to higher retirement incomes. Unfortunately the higher incomes prevent access to Medicaid, but are not sufficient to pay for needed services.

- This region has expressed particular interest in offering hospice and palliative care services
- Continued development of home and community based services, including personal care and Medicaid waiver services
- Further analysis is needed to project facility needs

FUTURE DEMAND

Based on the projected increase in elder population, the Aleutian region could have an over 65 population of 233 by 2018. According to national percentage estimates for expected nursing home residents, 11 people could need nursing home services, an increase in the current demand of 4. We can expect a corresponding increase in the number of elders experiencing functional limitations.

KODIAK ISLAND BOROUGH – KODIAK AREA NATIVE ASSOCIATION

The Elder Population in the Kodiak Island Borough:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 150 | Total 55+ | 310 |
| 65 – 74 | 107 | Total 65+ | 160 |
| 75 – 84 | 36 | M 55+ | 149 |
| 85+ | 17 | F 55+ | 161 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 6 | 28 - 62 | 12 | 9 |

CURRENT SERVICES

Nursing Home: 19 nursing home beds, 6 swing beds in Kodiak operated by Providence, Kodiak Island Medical Center.

Assisted Living: 20 units of assisted living within Bayview Terrace apartments.

Independent Senior Housing: Kodiak has 35 units of independent housing, 15 operated by the tribal housing authority.

PCA: Providence Kodiak Island Medical Center provides agency based personal care services to seniors in Kodiak. KIHA contracts with an Anchorage agency to provide consumer directed personal care services in Kodiak and the surrounding villages.

HCB: The Senior Citizens of Kodiak, Inc. (SCOK) provide comprehensive HCB services including adult day care, respite, congregate and home delivered meals, and caregiver support. Medicaid Waiver care coordination is offered by both SCOK and KIHA. Kodiak Area Native Association receives OAA funding and collaborates with SCOK to provide meals in regional villages.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Development of personal care services through a local provider such as Kodiak Area Native Association

FUTURE DEMAND

Based on the projected increase in elder population, the Kodiak region could have an over 65 population of 370 by 2018. According to national percentage estimates for expected nursing home residents, 18 people could need nursing home services, an increase in the current demand of 6. We can expect a corresponding increase in the number of elders experiencing functional limitations.

MUNICIPALITY OF ANCHORAGE – SOUTHCENTRAL FOUNDATION

The Elder Population in the Municipality of Anchorage:

| | | | |
|---------|-------------|-----------|-------------|
| 55 – 64 | 1160 | Total 55+ | 2134 |
| 65 – 74 | 669 | Total 65+ | 974 |
| 75 – 84 | 236 | M 55+ | 850 |
| 85+ | 69 | F 55+ | 1284 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 33 | 160 – 416 | 225 | * |

*Cannot differentiate between Anchorage residents and those from other areas in regional nursing and assisted living homes. There are a total of 151 Alaska Natives in 66 Anchorage assisted living homes; 14 in the Anchorage Pioneers Home, and approximately 60 – 65 in local nursing homes.

CURRENT SERVICES

This section will primarily highlight what is available through tribal health, housing and social service providers, with some information about non-tribal providers.

Nursing Home: 224 nursing home beds at Providence Extended Care and 90 beds at Mary Conrad Center.

Assisted Living: Approximately 554 assisted living beds in 78 homes in Anchorage, and an additional 228 beds in the Anchorage Pioneer Home.

Independent Senior Housing: There are 826 units of independent senior housing in the Municipality of Anchorage, 268 available through the Cook Inlet Housing Authority.

PCA: There are numerous agencies that provide both agency based and consumer directed personal care services.

HCB: There are numerous agencies providing comprehensive HCB services including adult day care, respite, congregate and home delivered meals, care coordination and caregiver support. SCF currently receives OAA funding for congregate, home delivered meals and transportation, and provides support services through their CHR program. With a current client database of over 700, SCF has instituted a waiting list for services, and is only able to provide intensive services to the clients with the highest needs.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Transitional housing for individuals not needing hospitalization, but unable to live alone or return to their community (ANTHC, SCF, ANMC project)
- Adult day health center for social activities and health monitoring of Anchorage elders, this would ideally include adult day services
- Up to 50 assisted living beds in Native owned/operated facilities, with special units or homes to serve clients with dementia
- SCF continue developing in-home services, case management, home health and personal care

FUTURE DEMAND

Based on the projected increase in elder population, the Anchorage region could have an over 65 population of 2,220 by 2018. According to national percentage estimates for expected nursing home residents, 109 people could need nursing home services, an increase in the current demand of 33. In Anchorage, projections are even more problematic due to the in-migration of elders needing to be closer to the tertiary care facility. More extensive research is necessary in the next six months to more accurately depict the facility and service needs in Anchorage and the roles of SCF, ANTHC and ANMC in providing those services.

MATANUSKA-SUSITNA BOROUGH – ANCHORAGE SERVICE UNIT, KNIK AND CHICKALOON

The Elder Population in the Mat-Su Borough:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 166 | Total 55+ | 286 |
| 65 – 74 | 88 | Total 65+ | 120 |
| 75 – 84 | 28 | M 55+ | 116 |
| 85+ | 4 | F 55+ | 170 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 3 | 18 - 55 | 27 | 24* |

* There are 24 Alaska Native residents in 11 Mat-Su assisted living homes, however we do not know if they have relocated from another area. The Palmer Pioneers Home does not house any Alaska Native elders at this time.

CURRENT SERVICES

Nursing Home: No nursing home beds, 4 swing beds at West Valley Medical Campus.

Assisted Living: There are 104 assisted living beds in 20 Mat-Su area homes, and 82 beds in the Palmer Pioneers Home.

Independent Senior Housing: There are 236 independent senior apartments in the Mat-Su Borough, none operated by tribal housing authorities.

PCA: There are numerous agencies that provide both agency based and consumer directed personal care services, all non-tribal providers.

HCB: There are numerous agencies providing comprehensive HCB services including adult day care, respite, congregate and home delivered meals, care coordination and caregiver support. The Chickaloon Village provides some services to elders through various grants and tribal funding.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED:

- A more extensive analysis of the individual tribal providers and communities is needed to fully understand the service and facility need

FUTURE DEMAND

Based on the projected increase in elder population, the Mat-Su region could have an over 65 population of 267 by 2018. According to national percentage estimates for expected nursing home residents, 13 people could need nursing home services, an increase in the current demand of 3. The small numbers of Alaska Native elders in this region should guide the development of services.

KENAI PENINSULA BOROUGH – CHUGACHMIUT, KENAITZE, NINILCHIK, SELDOVIA, TYONEK

The Elder Population in the Kenai Peninsula:

| | | | |
|---------|------------|-----------|------------|
| 55 – 64 | 228 | Total 55+ | 436 |
| 65 – 74 | 139 | Total 65+ | 208 |
| 75 – 84 | 55 | M 55+ | 208 |
| 85+ | 14 | F 55+ | 228 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 7 | 34 - 85 | 38 | 21* |

*There are 13 residents in 3 nursing homes, and 9 residents in 8 assisted living homes.

CURRENT SERVICES

Nursing Home: Heritage Place in Soldotna has 60 beds, South Peninsula Hospital in Homer has 25 beds, and Wesley Rehabilitation Center in Seward has 66 beds.

Assisted Living: There are 112 assisted living beds in 17 Kenai Peninsula homes.

Independent Senior Housing: There are 131 independent senior apartments in the Kenai Peninsula Borough. North Pacific Rim Housing is constructing tri-plexes in regional villages as multi-use supportive housing.

PCA: There are numerous agencies that provide both agency based and consumer directed personal care services, all non-tribal providers.

HCB: There are numerous agencies providing comprehensive HCB services including adult day care, respite, congregate and home delivered meals, care coordination and caregiver support. Chugachmiut receives OAA funding for food boxes to village elders and provides some supportive services through their CHR program. Seldovia Village Tribe and Ninilchik Traditional Council receive OAA funding for congregate and home delivered meals.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- An analysis of the utilization of the multi-use supported housing units is needed to further discussion on this model for replication in other small communities
- Further analysis of the individual communities is necessary

FUTURE DEMAND

Based on the projected increase in elder population, the Kenai Peninsula region could have an over 65 population of 480 by 2018. According to national percentage estimates for expected nursing home residents, 24 people could need nursing home services, an increase in the current demand of 7.

VALDEZ-CORDOVA CENSUS AREA

The Elder Population in the Valdez-Cordova Census Area:

| | | | |
|---------|-----------|-----------|------------|
| 55 – 64 | 99 | Total 55+ | 219 |
| 65 – 74 | 70 | Total 65+ | 120 |
| 75 – 84 | 39 | M 55+ | 105 |
| 85+ | 11 | F 55+ | 114 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 5 | 21 - 43 | 11 | 4 |

CURRENT SERVICES

Nursing Home: There are 10 nursing home beds at Cordova Community Medical Center and 15 swing beds at Valdez Community Hospital (Construction of a new hospital with 10 nursing home beds will be completed during the summer of 2004). Nursing home services collocated with rural hospitals help ensure financial viability.

Assisted Living: There are no assisted living beds.

Independent Senior Housing: There are 57 independent senior apartments in the region. 20 in Glennallen/Copper Center, 15 in Valdez and 22 in Cordova

PCA: There are two agencies in Valdez providing personal care to the Valdez/Glennallen area, and one in Cordova..

HCB: There are a few agencies providing Medicaid waiver based HCB services in Valdez, Glennallen and Cordova. Services include respite, and caregiver support. Valdez senior center receives OAA funding for meals and transportation in Valdez. Cordova Community Medical Center provides meals and transportation in Cordova in coordination with the Eyak Tribe, who also provides supportive services for elders.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Continued development of home and community based services to expand personal care and waiver services
- The Copper River Basin Regional Housing Authority is exploring the development of assisted living for that region. There may be a need for 5 – 8 units.
- Although there is a need for assisted living in Valdez, and some effort to develop it, it is questionable about the need for the Alaska Native elder population in the community. This will require further analysis.
- Separate analysis of the three main population centers is needed to fully understand the service and facility need.

FUTURE DEMAND

Based on the projected increase in elder population, the Valdez-Cordova region could have an over 65 population of 276 by 2018. According to national percentage estimates for expected nursing home residents, 14 people could need nursing home services, an increase in the current demand of 5.

ALL SOUTHEAST ALASKA BOROUGHES AND CENSUS AREAS – SEARHC, HOONAH, YAKUTAT, KETCHIKAN & METLAKATLA

The Elder Population in all Southeast Alaska Boroughs and Census Area:

| | | | |
|---------|-------------|-----------|-------------|
| 55 – 64 | 1044 | Total 55+ | 1012 |
| 65 – 74 | 685 | Total 65+ | 1109 |
| 75 – 84 | 303 | M 55+ | 2121 |
| 85+ | 89 | F 55+ | 1077 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|---|---|
| 40 | 183 – 419 | 120 | 54 |

CURRENT SERVICES

Nursing Home: Wildflower Court in Juneau with 44 beds, Ketchikan General Hospital with 46 beds, Petersburg Medical Center with 15 beds, Sitka Community Hospital with 15 beds, and Wrangell Medical Center with 14 beds.

Assisted Living: There are Pioneers Homes in the following communities: Juneau 48 beds, Sitka 102 beds, and Ketchikan 47 beds. There are two private licensed homes in Juneau with 11 units, two in Ketchikan (19 units), one in Wrangell (5 units) and one in Petersburg with 15 units.

Independent Senior Housing: Angoon has 6 units. Craig has nine units. Haines has three senior complexes with 38 units. Hoonah has 12 units. Hydaburg has 12 units. Juneau has 128 units in three developments. Kake has 11 units. Ketchikan has 49 units. Klawock has 12 units. Metlakatla has 25 units. Petersburg has 32 units. Saxman has 12 units. Sitka has 44 units in two developments. Wrangell has 24 units. Yakutat has 6 units.

PCA: Personal care services are available throughout Southeast primarily by two non-tribal agencies. However, Cornerstone Home Health does have a working agreement with the Central Council of Tlingit and Haida Tribes, and is providing services to tribal elders.

HCB: Medicaid waiver services including care coordination are available throughout Southeast. There are adult day centers in Juneau and Ketchikan. Meal services are available in many of the communities through Southeast Senior Services with OAA funding. Metlakatla, Klawock, Angoon, Central Council, Hoonah, Ketchikan Indian Corporation, Sitka Tribe, Craig Community Association and Yakutat Native Association also receive OAA funding for services.

There are senior centers in Yakutat, Skagway, Haines, Hoonah, Juneau, Angoon, Sitka, Kake, Wrangell, Hydaburg, Ketchikan, Petersburg, and Metlakatla.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- SEARHC, the Central Council of Tlingit and Haida Tribes, and the Tlingit-Haida Regional Housing Authority have conducted assessments of elders needs in this region. Primary findings are that elders want to remain in their own homes and communities. Further analysis of these reports and separation of Southeast communities is needed to get a full understanding of the facility and service needs of this population.
- Continued development of home and community based services to expand personal care and waiver services, providing services within the Tribal Health System
- SEARHC and the regional housing authority have expressed interest in developing assisted living. There could be a need for some Native owned and operated assisted living units in several communities.

FUTURE DEMAND

Based on the projected increase in elder population, the Southeast region of Alaska could have an over 65 population of 2,363 by 2018, the highest concentration in the state. According to national percentage estimates for expected nursing home residents, 116 people could need nursing home services, an increase in the current demand of 40.

**FAIRBANKS AND ALL INTERIOR COMMUNITIES – TANANA CHIEFS CONFERENCE, COUNCIL OF
ATHABASCAN TRIBAL GOVERNMENTS**

The Elder Population in Fairbanks and all Interior Communities:

| | | | |
|---------|------------|-----------|-------------|
| 55 – 64 | 668 | Total 55+ | 1357 |
| 65 – 74 | 441 | Total 65+ | 689 |
| 75 – 84 | 184 | M 55+ | 633 |
| 85+ | 64 | F 55+ | 724 |

Estimated Current Needs and Services

| SNF Demand | Estimated Elders with Functional Limitations | Approximate # Receiving Medicaid Svcs in FY03 | Current SNF or AL Residents (in region) |
|------------|--|--|---|
| 26 | 119 - 268 | 85 | 57* |

*Some of these residents could be from other areas.

CURRENT SERVICES:

Nursing Home: Denali Center in Fairbanks has 90 beds, with a high proportion of Alaska Native residents.

Assisted Living: The Fairbanks Pioneers Homes has 101 beds. There are an additional 20 homes in the Fairbanks area with 42 units, and a 14-unit home in Tanana.

Independent Senior Housing: There are 234 independent units in Fairbanks/North Pole, 4 units in Fort Yukon and 15 units in Nenana.

PCA: Personal care services are available through several agencies in Fairbanks, and are provided by Tanana Chiefs Conference Home Care program in the regional villages.

HCB: Medicaid waiver services including care coordination are available throughout the Interior region. There is an adult day center in Fairbanks. Fairbanks North Star Borough receives OAA funds for meal and transportation services in Fairbanks, Fairbanks Native Association receives funds for services to Alaska Native elders. Denakkanaaga receives OAA funding for supportive services throughout the region, and TCC provides meals in many of the regional villages.

PRELIMINARY POTENTIAL SERVICE AND FACILITY NEED

- Further analysis is needed in coordination with TCC's Home Care and Title VI programs of the needs in each of the interior subregions.
- The Yukon-Koyukuk subregion is seeking funding for a 9 unit assisted living home in Galena. There should be additional analysis to determine the need for other subregional assisted living homes.

FUTURE DEMAND

Based on the projected increase in elder population, the Interior region of Alaska could have an over 65 population of 1,558 by 2018. According to national percentage estimates for expected nursing home residents, 76 people could need nursing home services, tripling the current demand of 26.